FT486 (01/01)

Department of Motor Vehicles Tax Services P.O. Box 27422 Richmond, Virginia 23269-7422

VIRGINIA FUELS TAX SCHEDULE OF DEFAULTED TAX PAYMENT RECEIPTS

Read the filing information and instructions on the below.

SUPPLIER/PROVIDER INFORMATION	PLEASE PRIN	T IN INK OR TY	/PI
OUT I EIEIVI NOVIDEN IN ONIMATION			

Name	FEIN/SSN	Report Month/Year

DEFAULT PAYMENT INFORMATION

COMPANY NAME	COMPANY FEIN/SSN	DATE PAID	AMOUNT PAID
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
	<u> </u>	TOTAL AMOUNT PAID	\$

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 11/1/17		RIVIA	

This schedule provides detail to support the amount shown on Line 36 of your monthly Virginia fuels tax report.

List only those persons you previously reported as having defaulted on their tax payment by submitting a *Notice of Tax Payment Default* (FT214).

Suppliers can submit a default notice on <u>licensed</u> distributors or importers only. **Providers of Alternative Fuel** can submit a default notice on bonded bulk users or bonded retailer of alternative fuels only.

INSTRUCTIONS

SUPPLIER/PROVIDER INFORMATION

Name. Enter the name of the supplier/provider as it appears on your monthly report.

FEIN/SSN. Enter the FEIN/SSN of the supplier/provider.

Terminal Control Number. Enter the IRS Terminal Control Number shown on the Notice of Tax Payment Default (FT214).

DEFAULT PAYMENT INFORMATION

Name. Enter the name of the company made the payment.

FEIN/SSN. Enter the FEIN/SSN of the company.

Date Paid. Enter the month, day, and year that the payment made.

Amount Paid. Enter the total amount of defaulted tax paid.